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SD Secretary of State

STATE OF SOUTH DAKOTA
Statement of Legal Newspaper Ownership and Circulation

1. TITLE OF NEWSPAPER: Native Sun News Publishing		2. DATE: 9/5/23
3. FREQUENCY OF ISSUE: Weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY: 51	3B. ANNUAL SUBSCRIPTION PRICE $: 100.00
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers): 325 Omaha St. Suite #1 Rapid City, SD. 57701		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers): 325 Omaha Street Suite #1 Rapid City, SD. 57701		
6. FULL NAME OF PUBLISHER:		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given. FULL NAME: Jackie S. Giago		COMPLETE MAILING ADDRESS: 3827 Clover Street Rapid City, SD. 57702
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.: NONE		

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	2,437	2,437
B. PAID AND/OR REQUESTED CIRCULATION 1. Sales through dealers and carriers, street vendors, and counter sales.	~~1,278~~ 700	700
2. Mail Subscription (Paid and or requested)	1,278	1,278
3. Paid Electronic Copies	378	378
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	2356	2356
D. FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS	31	31
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	Ø	Ø
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	2387	2387
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	50	50
2. Return from News Agents	Ø	Ø
G. TOTAL (Sum of E, F1 and F2 – Should equal total shown in A.)	2437	2437

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

I swear that the statements made by me are true, correct, and complete:

Kirk A. Dickerson (Signature)

General Manager (Title)

State of South Dakota)
County of Pennington) **(Seal)**

Sworn to before me this 5th day of September, 20 23

Kirk A. Dickerson
Notary Public

My commission expires: September 8, 2027

KIRK A. DICKERSON NOTARY PUBLIC SEAL STATE OF SOUTH DAKOTA

Form: SOS REC 051 9/2016